



Minnesota Board of Barber Examiners

University Park Plaza Building
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Minneapolis, MN 55414

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Office e-mail: bbe.board@state.mn.us Board Website: www.barbers.state.mn.us

Barber School Application

The entire application process including public hearing must be completed to obtain the required registration to teach; solicit students; advertise or conduct any barber instruction for profit or tuition charge in the State of Minnesota.

The data provided by you on this application will be used by the Minnesota Board of Barber Examiner's to determine eligibility. You are not legally obligated to provide this information however; failure to complete the application process may delay processing or result in denial of your barber school application.

Disclosure of your Social Security number is required by Minnesota Statute 270C.72 and it may be requested by and released to the MN Commissioner of revenue. Your Social Security number may be used for Revenue Recapture as authorized by Minnesota Statute 270A.

Upon issuance of registration, all information provided in the application process, with the exception of your Social Security number, personal telephone and personal e-mail address will become public information pursuant to Minnesota Statute Chapter 13.

Pursuant to Minnesota Statutes 604.113 and 609.535, the Minnesota Board of Barber Examiner's is authorized to charge a service fee of \$30.00 for any check that is returned for nonpayment.

MN Session Law 2009: Chapter 101, Art. 2, Sec. 59, Subd. 3 - 10% surcharge to be assessed to all initial applications and renewals.

Application Fee: \$1133.00 (\$1030.00 and \$103.00 surcharge)

1. School Information

Name of School		School Telephone Number
Address of School		School E-mail Address (optional)
City	State	Zip Code
Tax Identification Number:	Employer Identification Number:	

Do Not Write In This Box – Board Use Only

Method of Payment: Cash, Check or Money order # _____ Amount: \$ _____ Process Date _____

This document is available in alternative formats to individuals with disabilities by calling 651-201-2820 or through the Minnesota Relay Service at 1-800-627-3529.

An Affirmative Action/Equal Opportunity Employer

2. Owner/Applicant Information

Last Name	First Name		Personal Telephone Number:
Address			Original Master Barber Registration Date:
City	State	Zip Code	Master Barber Registration Number
Social Security Number:		Owner Personal E-mail Address (optional)	

3. Operator Information – If different than owner

Last Name	First Name		Personal Telephone Number:
Address			Original Master Barber Registration Date:
City	State	Zip Code	Master Barber Registration Number
Social Security Number:		Personal E-mail Address (optional)	

4. Days and Time of Operation- Please indicate the days and times the school will be conducting business.

Days of the Week School Will Be Open	Hours of Operation
<input type="checkbox"/> Monday	
<input type="checkbox"/> Tuesday	
<input type="checkbox"/> Wednesday	
<input type="checkbox"/> Thursday	
<input type="checkbox"/> Friday	
<input type="checkbox"/> Saturday	
<input type="checkbox"/> Sunday	

5. Instructor(s)-Please provide the information on all instructors. (Please include a list of any additional instructors)

Instructor Name	Registration Number	Employment Status (Full or Part Time)	Days/Hours instructing

6. Additional Items to be submitted with Application: (Please label clearly)

- A. List of occupations and residences for the past ten (10) years for applicant and school operator if different.
- B. Complete financial Statement
- C. Plan of operation for the school including:
 - 1. Scale drawings showing:
 - a. Dimensions of the school
 - b. Size and location of entrances and exists
 - c. Waiting area separate from workstations or classroom
 - d. Classroom space of at least 25 square foot per student
 - e. Number of barber chairs (workstations) to be installed with a minimum of five feet between barber chairs, measured center to center.
 - f. One sink or dispensary as required by 2100.8100, subpart 3 for each barber chair.
 - g. One closed cabinet for clean towels for each barber chair
 - h. One closed container for soiled towels for each barber chair
 - i. Separate washroom facilities for men and women
 - j. At least one hair dryer
 - k. One time clock
 - 2. Detailed plans for:
 - a. Plumbing and sewer system-Including a statement regarding the availability and intended use of municipal sewer and water supplies
 - b. Lighting and Ventilation
 - c. Flooring material
 - 3. Statement showing the following will be available within the classroom
 - a. One desk for each enrolled student
 - b. Chart of skin and hair
 - c. Chart on blood supply to the face and neck
 - d. Chart on muscles of the face, head, and neck
 - e. Chart on nerves of the face head and neck
 - f. Chart on the bones of the face head and neck
 - g. One black (white board) of not less than six by three and one half feet
 - 4. Course outline including instructional units showing a course of study of not less than 1500 hours of instruction as described in Minnesota Statute §154.07
 - 5. Policies and information related to students including:
 - a. Copy of brochure which will be made available to students listing fees, and enrollment and termination procedures.
 - b. Provide copies of all financial aid and student refund policies
 - c. Copy of Student Rules and Disciplinary Action forms
 - 6. Certificate of Worker's Compensation Insurance pursuant to Minn. Stat. §176.182
 - 7. Copy of School Surety Bond of at least a minimum of \$25,000.00
 - 8. Provide a 3x5 signed photograph of the applicant

Upon receipt of application materials the Board will review the application for completeness and may request additional information from the applicant.

Upon determination that all application materials are complete the board will conduct a public hearing, having given appropriate notice, in accordance with Minnesota Statutes Chapter 14 and the rules promulgated there under. Final determination regarding registration will be made subsequent to the results of the public hearing and all appropriate due process.

Barber School Responsibilities

Renewal:

Your school registration will expire each year on December 31st. Failure to renew on or prior to that date will result in additional penalty fees. While the Minnesota Board of Barber Examiner's will make every effort to send renewal notices, it is your responsibility to assure your registration is renewed on time.

Business Structure Change:

If you change any part of your business structure, you must notify the Board immediately by providing documentation of the change or, at the request of the Board, a new application.

Name Change:

If the name of the school changes, please notify the board in writing and provide documentation of the change.

Address Change:

If the address of a school changes, a new application must be completed and the required application fee must be paid prior to issuance of a new registration. Change of physical location of the school requires a full new school application.

Barber Laws and Rules:

Copies of the Minnesota Barber Laws and Rules may be purchased from the Minnesota Bookstore (651.297.3000-660 Olive Street, St. Paul) or at: www.leg.state.mn.us

AFFIDAVIT OF APPLICANT

I attest that any judgment levied against the school or owner(s) on account of fraud, misrepresentation, or deceit practiced by them or their agents will be paid in full to the Minnesota Board of Barber Examiners. I further attest that the information provided within this application is true and accurate to the best of my knowledge and the application has not been altered in any way

I, _____ being duly sworn, depose and say that I am the

_____ of _____
(Title) (Name of school)

I have read and completed the above application and attest that all statements made are true and complete to the best of my knowledge.

Signature of Applicant

Date

Subscribed and sworn before me this _____ day of _____, 20_____

Notary Seal

Notary Public

6/2013

County

My Commission Expires: _____